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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 Chapter 11 |
| | Chapter 12 Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | art 1: Identify Yourself | | |
|----|---|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | Trisshauna | |
| | Write the name that is on | First name | First name |
| | your government-issued picture identification (for | Middle name | Middle name |
| | example, your driver's | Daniels | |
| | license or passport | Last name | Last name |
| | Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | |
| | have used in the last | First name | First name |
| | 8 years | | |
| | Include your married or | Middle name | Middle name |
| | maiden names. | Last name | Last name |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social | XXX - XX- 5076 | xxx - xx- |
| | Security number or federal Individual | OR | OR |
| | Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

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| D | ebtor 1 Trisshauna First Name | Daniels Middle Name Last Name | Case number (if known) |
|----|---|--|--|
| | | | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| | | | |
| 4. | Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| | Identification | Business name | Business name |
| | Numbers (EIN) you have used in the last | | |
| | 8 years | Business name | Business name |
| | In all of a bond and a second | | |
| | Include trade names and doing business as names | EIN | EIN |
| | J | | |
| | | EIN | EIN |
| | | | Liiv |
| 5 | Where you live | | If Debtor 2 lives at a different address: |
| ٥. | writere you live | 7004 0 01 1 4 4 4 4 | ii Debtor 2 lives at a dilierent address: |
| | | 7031 S Clyde Ave Apt A Number Street | Number Street |
| | | | |
| | | Objects Winsin COC40 | |
| | | Chicago Illinois 60649 City State Zip Code | City State Zip Code |
| | | | |
| | | Cook County | County |
| | | If your mailing address is different from the one | If Debtor 2's mailing address is different from yours, |
| | | above, fill it in here. Note that the court will send any | fill it in here. Note that the court will send any notices to |
| | | notices to you at this mailing address. | this mailing address. |
| | | | |
| | | Number Street | Number Street |
| | | | |
| | | | |
| | | City State Zip Code | City State Zip Code |
| 6. | Why you are choosing this district | Check one: | Check one: |
| | to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | | |
| | | | |
| | | | |
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| | | | |
| | | | |
| | | | _ |

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| Debtor 1 Trisshauna | | Daniels | | Case number (if kno | wn) |
|---|--|---|---|---|--|
| First Name | Middle Name | Last Name | | | |
| Part 2: Tell the Court Abo | out Your Bankruptcy | / Case | | | |
| 7. The chapter of the Bankruptcy Code you are choosing to file under | | ief description of each, see A 2010)). Also, go to the top of p | | | C. § 342(b) for Individuals Filing for opriate box. |
| 8. How you will pay the fee | more details aborcashier's check, may pay with a company with a company may pay the lindividuals to Possible I request that in judge may, but if the official poveryou choose this | out how you may pay. Typin or money order If your at credit card or check with a late fee in installments. If your stay Your Filing Fee in Installments in the fee be waived (You may so not required to, waive your ty line that applies to your | cally, if you ttorney is pre-printe ou choose filments (C) y request our fee, an or family si | ou are paying the submitting your ed address. this option, sig official Form 103 this option only d may do so onl ze and you are u | the clerk's office in your local court for efee yourself, you may pay with cash, in payment on your behalf, your attorney on and attach the <i>Application for A</i>). If you are filing for Chapter 7. By law, a y if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official |
| 9. Have you filed for bankruptcy within the last 8 years? | Ves. District District District | | When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Yes. Debtor District Debtor District | | When When | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. Do you rent your residence? | ✓ No. G | ndlord obtained an eviction juot to line 12. | | | you want to stay in your residence? St You (Form 101A) and file it with |

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Daniels Debtor 1 Trisshauna __ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. **|** For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Trisshauna Daniels Case number (if known)
First Name Middle Name Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Daniels Debtor 1 Trisshauna Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded **V** No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Trisshauna Daniels Signature of Debtor 1 Signature of Debtor 2 Executed on _ 8/2/2017 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Trisshauna | | Daniels | Case number (i | f known) |
|--|----------------------------|-------------------------|--------------------------|--|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed und | er Chapter 7, 11, 12, | or 13 of title 11, Unite | nave informed the debtor(s) about ed States Code, and have explained the also certify that I have delivered to the |
| If you are not | debtor(s) the notice requi | red by 11 U.S.C. § 34 | 2(b) and, in a case in | which § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge after | an inquiry that the inf | ormation in the sched | dules filed with the petition is incorrect. |
| attorney, you do not | • | , , | | · |
| need to file this page. | /s/ Chad Mizelle | | Date | 8/2/2017 |
| | Signature of Attorney for | or Debtor | | MM / DD / YYYY |
| | g | | | |
| | | | | |
| | Chad Mizelle | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 20 S. Clark Street | | | |
| | Street | | | |
| | 28th Floor | | | |
| | 2011 1 1001 | | | |
| | Chicago | | Illinois | 60603 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | | Email address | cmizelle@semradlaw.com |
| | | | | · |
| | | | Illinoi | s |
| | Bar number | | State | |

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| Fill in this infor | mation to identify your c | ase: | |
|------------------------|---------------------------|-------------|----------------------|
| Debtor 1 | Trisshauna | | Daniels |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | | | |

| П | Check if | this | is | an |
|---|----------|---------|----|----|
| | amende | d filir | ηg | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|---|---|
| | Your assets Value of what you own |
| . Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$1,815.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$1,815.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$13,906.00 |
| Your total liabilities | \$13,906.00 |
| Part 3: Summarize Your Income and Expenses | |
| Cariffication Four Moonto and Exponents | |
| 4. Schedule I: Your Income (Official Form 106I) | \$2,686.67 |
| Copy your combined monthly income from line 12 of Schedule I | |
| | |
| 5. Schedule J: Your Expenses (Official Form 106J) | \$2,731.00 |

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| Deb | tor 1 | Trisshauna | | Daniels | Case number (if known) | |
|-------------|--------|---|----------------------------|---|---|------------|
| | | First Name | Middle Name | Last Name | | |
| Part | 4: | Answer These Question | ns for Administrativ | e and Statistical Records | 1 | |
| 6. A | - | ou filing for bankruptcy und | • | | | |
| [| | o. You have nothing to repores. | t on this part of the form | Check this box and submit th | is form to the court with your other sch | edules. |
| 7. V | /hat l | kind of debt do you have? | | | | |
| [| | | | er debts are those incurred by a out lines 8-10 for statistical pur | n individual primarily for a personal, poses. 28 U.S.C. § 159. | |
| | | our debts are not primarily is form to the court with you | | have nothing to report on this p | part of the form. Check this box and sub | omit |
| | | the Statement of Your Cur 122A-1 Line 11; OR, Form | | Copy your total current monthl n 122C-1 Line 14. | y income from Official | \$1,530.88 |
| 9. | Сор | y the following special cat | egories of claims from | Part 4, line 6 of Schedule E/ | F: | |
| | Fron | m Part 4 on Schedule E/F, | copy the following: | | Total claim | |
| | 9a. I | Domestic support obligations | s (Copy line 6a.) | | \$0.00 | |
| | 9b. | Taxes and certain other debts | s you owe the governme | ent. (Copy line 6b.) | \$0.00 | |
| | 9c. (| Claims for death or personal | njury while you were int | oxicated. (Copy line 6c.) | \$0.00 | |
| | 9d. | Student loans. (Copy line 6f.) | | | \$0.00 | |
| | | Obligations arising out of a serity claims. (Copy line 6g.) | eparation agreement or o | divorce that you did not report a | \$0.00 | |
| | 9f. [| Debts to pension or profit-sha | aring plans, and other si | milar debts. (Copy line 6h.) | \$0.00 | |

\$0.00

9g. Total. Add lines 9a through 9f.

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| Fill in this | inforr | nation to identify your c | ase: | | | | | |
|-----------------------------|----------|---|-------------------|--------|---|---------------|--|--|
| Debtor 1 | | Trisshauna | | | Daniels | | | |
| Debtor 1 | | First Name | Middle N | lame | Last Name | | | |
| Debtor 2 (Spouse, if fil | ing) | First Name | Middle N | lama | Last Name | | | |
| | - | | | vairie | | | | |
| | | ankruptcy Court for the: | Northern | | District of Illinois (State) | | | |
| Case num (If known) | ber | | | | | | | |
| Officia | l Fo | orm 106A/B | | | | | | Check if this is an |
| | | | | | | | | amended filing |
| | | e A/B: Prope | | | | | | 12/1 |
| | _ | | | | n asset only once. If an asset fit ccurate as possible. If two mar | | | |
| - | | supplying correct inform and case number (if k | | - | e is needed, attach a separate : question. | sheet to this | form. On the top of any a | additional pages, |
| Part 1: | Desc | ribe Each Residenc | e, Building, La | nd, d | or Other Real Estate You O | wn or Have | an Interest In | |
| _ | own | or have any legal or ec | quitable interest | in an | y residence, building, land, or | similar prope | erty? | |
| ✓ | No. 0 | Go to Part 2 | | | | | | |
| | Yes. | Where is the property? | | | | | | |
| | | | | Wh | at is the property? Check all that | at apply. | | claims or exemptions. Put |
| 1.1 | Stree | t address, if available, or | other description | L | Single-family home | | | red claims on Schedule D: nims Secured by Property. |
| | | | • | | Duplex or multi-unit building | | Current value of the | Current value of the |
| | | | | | Condominium or cooperative Manufactured or mobile home | | entire property? | portion you own? |
| | | | | | Land | | | |
| | Num | ber Street | | | Investment property | | Describe the nature of interest (such as fee s | |
| | City | State | Zip Code | | Timeshare Other | | the entireties, or a life | |
| | City | State | Zip Code | | <u></u> | | Chack if this is as | ammunity property |
| | | | | | o has an interest in the proper | ty? Check | (see instructions) | mmunity property |
| | | | | on | e. Debtor 1 only | | | |
| | | | | | Debtor 2 only | | | |
| | | | | | Debtor 1 and Debtor 2 only | | | |
| | | | | | At least one of the debtors and a | nother | | |
| | | | | | ner information you wish to add | l about this | tem, such as local | |
| If you | own (| or have more than one, li | et here: | pro | perty identification number: | | | |
| ii you | OWII | or mave more than one, is | st fiele. | Wh | at is the property? Check all that | at apply. | Do not deduct secured | claims or exemptions. Put |
| 1.2 | <u> </u> | t adduses if available an | | | Single-family home | | | red claims on Schedule D: aims Secured by Property. |
| | Stree | t address, if available, or | other description | | Duplex or multi-unit building | | | , , |
| | | | | | Condominium or cooperative | | Current value of the entire property? | Current value of the portion you own? |
| | | | | | Manufactured or mobile home | | | |
| | Num | ber Street | | | Land Investment property | | Describe the nature of | f your ownership |
| | | | | | Timeshare | | interest (such as fee s the entireties, or a life | |
| | City | State | Zip Code | | Other | _ | | —————————————————————————————————————— |
| | | | | \ | | to Observe | | mmunity property |
| | | | | on | o has an interest in the proper e. | ty? Check | (see instructions) | |
| | | | | | Debtor 1 only | | | |
| | | | | | Debtor 2 only | | | |
| | | | | | Debtor 1 and Debtor 2 only | | | |
| | | | | | At least one of the debtors and a | nother | | |
| | | | | | ner information you wish to add perty identification number: | l about this | tem, such as local | |

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| Deptor i | Trisshauna First Name | Middle Name | | Case number (ii | if known) | |
|------------|---|---|--|-----------------|---|---|
| 1.3 Str | First Name eet address, if available, or oth mber Street | zip Code | Daniels Last Name What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Other Debtor 1 only | C C e D ir | Oo not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Describe the nature of the entirest (such as fee she entireties, or a life.) | imple, tenancy by |
| | d the dollar value of the por | tion you own for | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about property identification number: all of your entries from Part 1, including | t this item, su | | |
| you ha | Describe Your Vehicle | | L | | | |
| you ha | Describe Your Vehicles wn, lease, or have legal or that someone else drives. If y ans, trucks, tractors, sport ution | S equitable interes ou lease a vehicle, | st in any vehicles, whether they are regis, also report it on Schedule G: Executory Cor | | • | |
| you ha | Describe Your Vehicles wn, lease, or have legal or a that someone else drives. If y ans, trucks, tractors, sport util o | S equitable interes ou lease a vehicle, | st in any vehicles, whether they are regis, also report it on Schedule G: Executory Cor | ? Check E | nexpired Leases. Do not deduct secured the amount of any secured | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims <i>Secured by Property</i> . Current value of the portion you own? |

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| DIOI I | Trisshauna First Name | Middle Name | Daniels Last Name | _ Case numbe | | |
|-------------------|---|--------------|--|--|---|---|
| 0.0 | | Wildule Name | | | D | -1-1 |
| 3.3 | Make Model: | | Who has an interest in the properties. | erty? Check | Do not deduct secured the amount of any secu | • |
| | Year: | - | Debtor 1 only | | | nims Secured by Propert |
| | Approximate mileage: | | = | | | |
| | | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 only | | entire property? | portion you own? |
| | | | At least one of the debtors and | another | | |
| | | | Check if this is community p | roperty (see | | |
| | | | instructions) | | | |
| 3.4 | Make | | Who has an interest in the prope | erty? Check | Do not deduct secured | claims or exemptions. F |
| | Model: | | one. | - | the amount of any secu | |
| | Year: | | Debtor 1 only | | Creditors Who Have Cla | nims Secured by Propert |
| | Approximate mileage: | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 only | | entire property? | portion you own? |
| | | | At least one of the debtors and | another | | |
| | | | Check if this is community p | | | |
| | | | Olieck ii tilis is collilliullity p | operty (see | | |
| | | | er recreational vehicles, other vehit, fishing vessels, snowmobiles, motor | | | |
| Exa | mples: Boats, trailers, motors No Yes Make | | er recreational vehicles, other vehit, fishing vessels, snowmobiles, motor | rcycle accessorie | Do not deduct secured | • |
| Example Example 1 | mples: Boats, trailers, motors No Yes | | er recreational vehicles, other vehit, fishing vessels, snowmobiles, motor Who has an interest in the proper one. | rcycle accessorie | Do not deduct secured the amount of any secu | • |
| Example Example 1 | mples: Boats, trailers, motors No Yes Make Model: | | who has an interest in the proper one. Debtor 1 only | rcycle accessorie | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule ims Secured by Propert |
| Example Example 1 | mples: Boats, trailers, motors. No Yes Make Model: Year: Approximate mileage: | | who has an interest in the proper one. Debtor 1 only Debtor 2 only | rcycle accessorie | Do not deduct secured the amount of any secu Creditors Who Have Cla | rred claims on Schedule nims Secured by Propert Current value of the |
| Example Example 1 | mples: Boats, trailers, motors No Yes Make Model: Year: | | who has an interest in the proper one. Debtor 1 only Debtor 2 only Debtor 2 only | rcycle accessorio | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule ims Secured by Propert |
| Example Example 1 | mples: Boats, trailers, motors. No Yes Make Model: Year: Approximate mileage: | | who has an interest in the proper one. Debtor 1 only Debtor 2 only At least one of the debtors and | erty? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | rred claims on Schedule nims Secured by Propert Current value of the |
| Example Example 1 | mples: Boats, trailers, motors. No Yes Make Model: Year: Approximate mileage: | | who has an interest in the proper one. Debtor 1 only Debtor 2 only Debtor 2 only | erty? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | rred claims on Schedule nims Secured by Propert Current value of the |
| 4.1 | mples: Boats, trailers, motors. No Yes Make Model: Year: Approximate mileage: | | who has an interest in the proper one. Debtor 1 only Debtor 2 only At least one of the debtors and Check if this is community p | erty? Check another roperty (see | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule hims Secured by Propert Current value of the portion you own? |
| 4.1 | mples: Boats, trailers, motors. No Yes Make Model: Year: Approximate mileage: Other information: | | who has an interest in the proper one. Debtor 1 only Debtor 2 only At least one of the debtors and instructions) | erty? Check another roperty (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. Fired claims on Schedule |
| 4.1 | mples: Boats, trailers, motors. No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | | who has an interest in the proper one. Debtor 1 only Debtor 2 only At least one of the debtors and Check if this is community prinstructions) Who has an interest in the proper one. | erty? Check another roperty (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. For the claims on Schedule |
| 4.1 | mples: Boats, trailers, motors. No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | | who has an interest in the proper one. Debtor 1 only Debtor 2 only At least one of the debtors and Check if this is community prinstructions) Who has an interest in the proper one. | erty? Check another roperty (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. For the claims on Schedule |
| 4.1 | mples: Boats, trailers, motors. No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | | who has an interest in the proper one. Debtor 1 only Debtor 2 only At least one of the debtors and instructions) Who has an interest in the proper one. Debtor 1 and Debtor 2 only Check if this is community prinstructions) Who has an interest in the proper one. Debtor 1 only | erty? Check another roperty (see | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classifications | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. Fired claims on Schedule hims Secured by Propert |
| 4.1 | mples: Boats, trailers, motors. No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | | who has an interest in the proper one. Debtor 1 only Debtor 2 only At least one of the debtors and Check if this is community prinstructions) Who has an interest in the proper one. Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 this is community prinstructions) Who has an interest in the proper one. Debtor 1 only Debtor 2 only | erty? Check another roperty (see | Do not deduct secured the amount of any secu Creditors Who Have Classian Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classian Current value of the | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. For the claims on Schedule hims Secured by Propert Current value of the |
| 4.1 | mples: Boats, trailers, motors. No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | | who has an interest in the proper one. Debtor 1 only Debtor 2 only At least one of the debtors and Check if this is community prinstructions) Who has an interest in the proper one. Debtor 2 only Debtor 3 and Debtor 4 only Debtor 5 only Debtor 6 one. Debtor 7 only Debtor 7 only Debtor 1 only | erty? Check another roperty (see erty? Check | Do not deduct secured the amount of any secu Creditors Who Have Classian Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classian Current value of the | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. For the claims on Schedule hims Secured by Propert Current value of the |

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Daniels Debtor 1 Trisshauna Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Misc. Household Goods and Furniture \$750.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Misc. Consumer Electronics (TV x 2, computer, cell phone, etc.) \$440.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$375.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Misc. Costume Jewelry \$100.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1665.00 for Part 3. Write that number here

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Debtor 1 Trisshauna **Daniels** Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$150.00 17.1. Checking account: TCF 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Deb ⁻ | tor 1 Trisshauna First Name | Middle Nesse | Daniels | Case number (if known) | | | | |
|------------------|---|--|----------------------------|---|----------|--|--|--|
| | First Name | Middle Name | Last Name | | | | | |
| 20. | | orate bonds and other negotia | | | | | | |
| | Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. | | | | | | | |
| | | ents are those you cannot transfe | i to someone by signin | g of delivering them. | | | | |
| | ✓ No | | | | | | | |
| | Yes. Give specific | | | | | | | |
| | information about them | Issuer name: | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | _ | | | |
| 21. | Retirement or pension | | \ thrift aguings account | s, or other pension or profit-sharing plans | | | | |
| | | na, Enisa, Reugii, 401(k), 403(b |), tillit saviligs account | s, or other pension or profit-straining plans | | | | |
| | No No | Type of account: | Institution name: | | | | | |
| | Yes. List each account | | | | | | | |
| | separately. | 401(k) or similar plan: | | | _ | | | |
| | | Pension plan: | | | _ | | | |
| | | IRA: | | | | | | |
| | | Retirement account: | | | - | | | |
| | | Keogh: | | | _ | | | |
| | | Additional account: | | | - | | | |
| | | | | | - | | | |
| | | Additional account: | | | _ | | | |
| 22. | Security deposits and | | | | | | | |
| | | d deposits you have made so that with landlords, prepaid rent, publi | | | | | | |
| | companies, or others | , p | , g, - | ,, | | | | |
| | ✓ No | | Institution name: | | | | | |
| | Yes | Electric: | | | | | | |
| | _ | Gas: | | | | | | |
| | | | | | _ | | | |
| | | Heating oil: | | | _ | | | |
| | | Security deposit on rental unit: | | | | | | |
| | | Prepaid rent: | | | | | | |
| | | Telephone: | - | | _ | | | |
| | | Water: | | | - | | | |
| | | Rented furniture: | | | | | | |
| | | Other: | | | _ | | | |
| 23. | Annuities (A contract fo | or a periodic payment of money to | you, either for life or fo | or a number of years) | | | | |
| | ✓ No | | | | | | | |
| | Yes | Issuer name and description: | | | | | | |
| | <u> </u> | | | | | | | |
| | | | | | | | | |
| | | | | | - | | | |
| | | - | | | <u>-</u> | | | |

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| Debto | or 1 Trisshauna | | Daniels | Case number (if known) | |
|-------|---|---|---------------------------------------|--|---|
| | First Name | Middle Name | Last Name | | |
| 24. | | lucation IRA, in an account in a b)(1), 529A(b), and 529(b)(1). | qualified ABLE program, or u | nder a qualified state tuition program. | |
| | No Inst | titution name and description. Sep | arately file the records of any inte | rests.11 U.S.C. § 521(c): | |
| | <u> </u> | | | | |
| 0.5 | Tourse a militable | | akkan khan anakhina Bakadia B | | |
| 25. | exercisable for yo | or future interests in property (our benefit | otner than anything listed in li | ne 1), and rights or powers | |
| | ✓ No Yes. Describe. | | | | |
| 26. | | nts, trademarks, trade secrets, domain names, websites, procee | | | |
| | No Yes. Describe. | | | , | |
| | Tes. Describe. | | | | |
| 27. | | ses, and other general intangibg permits, exclusive licenses, coop | | or licenses, professional licenses | |
| | No No Describe | | | | |
| | Yes. Describe. | | | | |
| | | | | | |
| Mon | ey or property o | owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ey or property o | | | | portion you own? Do not deduct secured |
| | | | | | portion you own? Do not deduct secured |
| | Tax refunds owed No Yes. Give spec | to you | | Federal: | portion you own? Do not deduct secured |
| | Tax refunds owed ✓ No Yes. Give spec about the you already | to you ific information em, including whether dy filed the returns | | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed ✓ No Yes. Give spec about the you alread and the tax | to you ific information m, including whether | | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed No Yes. Give spec about the you alrear and the ta | ific information em, including whether dy filed the returns ax years | upport, child support, maintenan | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed No Yes. Give spec about the you alread and the ta Family support Examples: Past due | to you ific information em, including whether dy filed the returns ax years | upport, child support, maintenan | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed ✓ No Yes. Give spec about the you alread and the ta Family support Examples: Past due | ific information em, including whether dy filed the returns ax years | upport, child support, maintenan | State: Local: ce, divorce settlement, property settlemen | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed ✓ No Yes. Give spec about the you alread and the ta Family support Examples: Past due | to you ific information em, including whether dy filed the returns ax years | upport, child support, maintenan | State: Local: ce, divorce settlement, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t |
| 28. | Tax refunds owed ✓ No Yes. Give spec about the you alread and the ta Family support Examples: Past due | to you ific information em, including whether dy filed the returns ax years | upport, child support, maintenan | State: Local: ce, divorce settlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 |
| 29. | Tax refunds owed ✓ No Yes. Give spec about the you alrear and the ta Family support Examples: Past due ✓ No Yes. Give spec | to you ific information em, including whether dy filed the returns ax years | upport, child support, maintenan | State: Local: Ce, divorce settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed ✓ No Yes. Give spec about the you alread and the ta Family support Examples: Past due ✓ No Yes. Give spec Other amounts so Examples: Unpaid v | to you ific information em, including whether dy filed the returns ax years | nts, disability benefits, sick pay, v | State: Local: Ce, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed ✓ No Yes. Give spec about the you alread and the ta Family support Examples: Past due ✓ No Yes. Give spec Other amounts so Examples: Unpaid v | ific information em, including whether dy filed the returns ax years e or lump sum alimony, spousal su ific information | nts, disability benefits, sick pay, v | State: Local: Ce, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed No Yes. Give spec about the you alrear and the ta Family support Examples: Past due No Yes. Give spec | ific information mm, including whether dy filed the returns ax years e or lump sum alimony, spousal su ific information meone owes you wages, disability insurance paymer ecurity benefits; unpaid loans you | nts, disability benefits, sick pay, v | State: Local: Ce, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb | tor 1 Trisshauna | | Daniels | Case number (if known) | |
|------|--|-----------------------------|--|--|--|
| | First Name | Middle Name | e Last Name | | |
| 31. | Interests in insurance Examples: Health, disab | | ealth savings account (HSA); credit, h | omeowner's, or renter's insurance | |
| | No Yes. Name the insure of each policy and | | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | | y of a living trust, expect | n someone who has died proceeds from a life insurance police | , or are currently entitled to receive | |
| 33. | Claims against third p Examples: Accidents, en | | you have filed a lawsuit or made surance claims, or rights to sue | a demand for payment | |
| 34. | Other contingent and to set off claims No Yes. Describe | unliquidated claims o | f every nature, including counterd | elaims of the debtor and rights | |
| 35. | Any financial assets y No Yes. Describe | ou did not already list | | | |
| 36. | | - | m Part 4, including any entries fo | | \$150.00 |
| Part | _ | | | nterest In. List any real estate in Par | t 1 . |
| 37. | No. Go to Part 6. Yes. Go to line 38. | ny legal or equitable ii | nterest in any business-related pro | | Current value of the cortion you own? On not deduct secured claims or exemptions |
| 38. | Accounts receivable of No Yes. Describe | or commissions you al | ready earned | | |
| 39. | Office equipment, furi Examples: Business-rel No Yes. Describe | | e, modems, printers, copiers, fax ma | ichines, rugs, telephones, desks, chairs, elec | ronic devices |
| | | | | | |

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| Deb | tor 1 Trisshauna | Daniels | Case number (if known) | |
|--------|-----------------------------|--|---------------------------------------|---|
| 1.0 | First Name | Middle Name Last Name | | |
| 40. | Machinery, fixtures, equ | pment, supplies you use in business, and tools | of your trade | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 41. | Inventory | | | |
| | - N | | | |
| | Yes. Describe | | | |
| | Tes. Describe | | | |
| | | | | |
| 42. | Interests in partnerships | or joint ventures | | |
| | ✓ No | | | |
| | Yes. Give specific | Name of entity: | % of ownership: | |
| | information about | | | · - |
| | them | | | |
| | | | | |
| 40.4 | O | As an alban consultations | · · · · · · · · · · · · · · · · · · · | |
| 43. | Customer lists, mailing lis | ts, or other compliations | | |
| | ✓ No | | | |
| | Yes. Do your lists incl | ude personally identifiable information (as defined in | 11 U.S.C. § 101(41A))? | |
| | ☐ No | | | |
| | Yes. Describe | . | | |
| | | | | |
| 44. | Any business-related pro | pperty you did not already list | | |
| | ✓ No | | | |
| | Yes. Give specific | | | |
| | information | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | of your entries from Part 5, including any entrie | s for pages you have attached | |
| For Pa | art 5. Write that number i | ere | | |
| Part | | n- and Commercial Fishing-Related Prop | perty You Own or Have an Interest In. | |
| | If you own or have an int | erest in farmland, list it in Part 1. | | |
| 46. | Do you own or have any | legal or equitable interest in any farm- or comi | mercial fishing-related property? | |
| | No. Go to Part 7. | | | Current value of the |
| | Yes. Go to line 47. | | | portion you own? Do not deduct secured claims |
| | | | | or exemptions |
| 47. | Farm animals | | | |
| | Examples: Livestock, pou | try, tarm-raised tish | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |

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| Deb | tor 1 Trisshauna First Name | Middle Neme | Daniels | Case number (if known) | |
|--------------|--------------------------------|-------------------------------------|--------------------------|--------------------------------|-------------|
| 40 | | Middle Name | Last Name | | |
| 48. | Crops-either growing of | or harvested | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | _ | | | | |
| | _ | | | | |
| 49. | Farm and fishing equip | ment, implements, machinery, fixt | ures, and tools of trade | • | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |
| 50. | Farm and fishing suppl | ies, chemicals, and feed | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |
| 51. | Any farm- and commer | cial fishing-related property you d | id not already list | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | Г | |
| | | of your entries from Part 6, includ | | - | |
| for Pa | art 6. Write that number | here | | | |
| | | | | _ | |
| | | | | | |
| | | | | | |
| Part | 7: Describe All Pro | perty You Own or Have an Inte | erest in That You Did | Not List Above | |
| 53. | | erty of any kind you did not alread | ly list? | | |
| | Examples: Season tickets | s, country club membership | | | |
| | ✓ No | | | | |
| | Yes. Give specific | | | | |
| | information | | | | |
| | | | | | |
| | | | | | |
| 54. A | dd the dollar value of al | of your entries from Part 7. Write | that number here | | > |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Part | 8: List the Totals of | Each Part of this Form | | | |
| | David de Tatal va al antata | line 0 | | | |
| 55. | Part 1: lotal real estate | , line 2 | | | |
| 56 | part 2 total vehicles, line | 5 | | | |
| | | d household items, line 15 | | | |
| | | | \$1665.00 | <u> </u> | |
| 58. F | Part 4: Total financial as | sets, line 36 | \$150.00 | | |
| 59. | Part 5: Total business-re | elated property, line 45 | | | |
| 60 | Part 6: Total farm- and f | ishing-related property, line 52 | | <u> </u> | |
| | | | | <u> </u> | |
| 61. | Part 7: Total other prope | erty not listed, line 54 | | <u></u> | |
| 62. | Total personal property. | Add lines 56 through 61 | \$1815.00 | | + \$1815.00 |
| | | | Ψ1010.00 | Copy personal property total ► | - φισισ.σσ |
| | | | | | 4.0.5 |
| 60.7 | otal of all presents are C | obodulo A/P Add line EE : line CO | | | \$1815.00 |
| 03. T | otal of all property on S | chedule A/B. Add line 55 + line 62 | | | 1 |

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| | | Do | cument | Page 20 (| of 70 | | | |
|--|---|--|--|--|------------------------------------|--|---|---|
| Fill in this infor | mation to identify your o | case: | | | | | | |
| Debtor 1 | Trisshauna First Name | Middle Name | Daniel Last N | | _ | | | |
| Debtor 2 (Spouse, if filing) | | | | | _ | | | |
| | First Name sankruptcy Court for the: | Middle Name Northern | Last N District of II | | _ | | | |
| Case number (If known) | - | | (| , and the second | _ | | | |
| Official | Form 106C | | | | | | | Check if this is an amended filing |
| Schedul | e C: The Prop | erty You Claim | as Exe | mpt | | | | 04/16 |
| information. Uas exempt. If | Jsing the property yo more space is needed | ssible. If two married per u listed on <i>Schedule A</i> I, fill out and attach to tl and case number (if kno | <i>/B: Property</i> nis page as r | Official Form 1 | 06A/B) a | s your source | e, list the property th | nat you claim |
| state a speci the amount o tax-exempt r under a law t | fic dollar amount as of any applicable sta etirement funds—m that limits the exemp | nim as exempt, you mu exempt. Alternatively, tutory limit. Some exer ay be unlimited in dolla tion to a particular do to the applicable statu | you may cla mptions—su ar amount. l llar amount | aim the full fair ich as those fo However, if you and the value o | r market or health u claim a | value of the aids, rights to exemption | property being exe o receive certain b of 100% of fair ma | empted up to enefits, and arket value |

Part 1: Identify the Property You Claim as Exempt

| Па | tak facility the Froperty roa olam | r do Exchipt | | | | |
|---|---|----------------------------------|---|------------------------------------|--|--|
| 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | |
| | <u> </u> | . , . | | | | |
| | You are claiming federal exemption: | s. 11 U.S.C. § 522(b)(| 2) | | | |
| 2. | For any property you list on Schedule A | /B that you claim as e | exempt, fill in the information below. | | | |
| | Brief description of the property and | Current value of | Amount of the exemption you claim | Specific laws that allow exemption | | |
| | line on Schedule A/B that lists this property | the portion you own | Check only one box for each exemption. | | | |
| | | Copy the value from Schedule A/B | | | | |
| | Brief | | | 735 ILCS 5/12-1001(b) | | |
| | description: Misc. Household Goods | \$750.00 | \$750.00 | | | |
| | and Furniture | | 100% of fair market value, up to any | - | | |
| | Line from | | applicable statutory limit | | | |
| | Schedule A/B: 06 | | | | | |
| | Brief | \$375.00 | _ | 735 ILCS 5/12-1001(a) | | |
| | description: Used Clothing | \$375.00 | \$375.00 | | | |
| | Line from | | 100% of fair market value, up to any | - | | |
| | Schedule A/B:11 | | applicable statutory limit | | | |
| 3. | ✓ No | ery 3 years after that for | 375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case? | | | |

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Debtor 1 Trisshauna **Daniels** Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$440.00 description: **✓** \$440.00 Misc. Consumer 100% of fair market value, up to any Electronics (TV x 2, applicable statutory limit computer, cell phone, etc.) Line from Schedule A/B: 07 Brief 735 ILCS 5/12-1001(b) \$100.00 description: \$100.00 Misc. Costume Jewelry 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) \$150.00 description: **✓** \$150.00 Checking account, TCF 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 17

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| | | | | · · | | | | |
|-----------|---------------|--------------------------------|--|-----------------------------|-------------|---|---|-----------------------------------|
| Fill in t | this inforr | mation to identify your c | ase: | | | | | |
| Debto | r 1 | Trisshauna | | Daniels | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| Debto | r 2 | | | | | | | |
| (Spouse | e, if filing) | First Name | Middle Name | Last Name | | | | |
| United | States B | ankruptcy Court for the: | Northern | District of Illinois | | | | |
| _ | _ | | | (State) | | | | |
| (If know | number n) | | | | | | | |
| , | | Form 106D | | | | | | Check if this is an |
| OIII | Clai | םסטו ווווטם | | | | | | amended filing |
| Sch | nedu | le D: Credit | ors Who Ha | ve Claims S | Secure | ed by Prop | erty | 12/15 |
| more s | pace is r | - | ble. If two married peoploional Page, fill it out, nun | | • | • | | |
| 1. D | o any c | reditors have claims | secured by your proper | ty? | | | | |
| Ī, | No. C | heck this box and sub | mit this form to the court v | with your other schedu | es. You hav | e nothing else to repo | ort on this form. | |
| | Yes. I | Fill in all of the information | on below. | | | | | |
| Part 1 | List A | All Secured Claims | | | | | | |
| fc | or each cla | aim. If more than one cre | or has more than one secu ditor has a particular claim, alphabetical order according | list the other creditors in | Part 2. As | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |

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| Filli | n this infor | mation to identify your c | ase: | | | | | |
|--|---|---|--|--|---|--|--|---|
| Deb | tor 1 | Trisshauna | | Daniels | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| | tor 2 | | | | | | | |
| (Spo | use, if filing) | First Name | Middle Name | Last Name | | | | |
| Unit | ed States E | ankruptcy Court for the: | Northern | District of Illinois | | | | |
| | | | | (State) | | | | |
| (If kno | e number own) | | | | | | | |
| Off | icial F | orm 106E/F | | | | Ch | eck if this is a | n amended filing |
| | | | | | | | | |
| Sc | hedu | ile E/F: Cre | editors Who | Have Unsec | cured Claims | | | 12/15 |
| othe Form clain the e knov | r party to a 106A/B) a ns that are entries in t n). | any executory contracts and on <i>Schedule G: Exe</i> Ilisted in <i>Schedule D: C</i> he boxes on the left. At | s or unexpired leases that cutory Contracts and Une Creditors Who Hold Claims | could result in a claim. A expired Leases (Official F Secured by Property. If I | s and Part 2 for creditors wit Also list executory contracts orm 106G). Do not include a more space is needed, copy op of any additional pages, v | s on <i>Sched</i> iny credito the Part y | <i>lule A/B: Pro</i> ors with partia ou need, fill | perty (Official ally secured it out, number |
| 1. | Do any ci | editors have priority un | secured claims against y | ou? | | | | |
| | √ No. 0 | Go to Part 2. | | | | | | |
| | Yes. | | | | | | | |
| 2. | listed, ider As much a Continuat | ntify what type of claim it as possible, list the claims ion Page of Part 1. If mor | is. If a claim has both priorit in alphabetical order accord e than one creditor holds a | ty and nonpriority amounts ding to the creditor's name particular claim, list the othe | | both priorit | ty and nonprid | ority amounts. |
| | (For an ex | planation of each type of | claim, see the instructions f | for this form in the instruction | on booklet.) | Total | Driority | |

claim

amount

amount

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Debtor 1 Trisshauna Daniels Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 AM COLL SYS \$343.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 5/2011 1185 N BIXBY RD Number Street As of the date you file, the claim is: Check all that apply. Contingent COLUMBUS 43213 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or At least one of the debtors and another divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CREDITOR: SBI **✓** No Other. Specify **PITTSBURGH** Yes 4.2 Bank of America \$1.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 982236 When was the debt incurred? n/a Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated El Paso Texas 79998 City Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify _ Notice Only Is the claim subject to offset? **✓** No Clerk of the Circuit Court \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 50 W Washington When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60602 Chicago Illinois Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt 2016-M1-105152 MC NEAL, **✓** LAJUNISE v. Daniels, Trisshauna Is the claim subject to offset? Other. Specify el. al **✓** No Yes

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Page 25 of 70 Case number (if known) Debtor 1 Trisshauna First Name Daniels Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2:

| | After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. | | |
|-----|--|---|------------|
| 4.4 | Comcast | Last 4 digits of account number | \$600.00 |
| | Nonpriority Creditor's Name 11621 E. Marginal Way # 5 | When was the debt incurred? | |
| | Number Street | when was the dest mounted. | |
| | Bankruptcy Dept | As of the date you file, the claim is: Check all that apply. | |
| | Zamachto y Dopt | Contingent | |
| | Seattle Washington 98168 | Unliquidated | |
| | City State Zip Code | Disputed | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | <u> </u> | Student loans | |
| | Debtor 2 only | Obligations arising out of a separation agreement or | |
| | Debtor 1 and Debtor 2 only | divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim relates to a community debt | Other. Specify | |
| | Is the claim subject to offset? | | |
| | ✓ No | | |
| | Yes | | |
| 4.5 | ComEd | | \$1,900.00 |
| 7.0 | Nonpriority Creditor's Name | Last 4 digits of account number | Ψ1,000.00 |
| | 3 Lincoln Center Number Street | When was the debt incurred?n/a | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Bankruptcy Section | Contingent | |
| | Oakbrook Terrace Illinois 60181 | Unliquidated | |
| | Oakbrook Terrace Illinois 60181 City State Zip Code | Disputed | |
| | Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 only | | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim relates to a community debt | Other. Specify Utility | |
| | Is the claim subject to offset? | | |
| | ✓ No | | |
| | Yes | | |
| 4.6 | CREDIT COLL | | \$191.00 |
| 7.0 | Nonpriority Creditor's Name | Last 4 digits of account number 3306 | Ψ101.00 |
| | 16 Distributor Drive, Suite 1 Number Street | When was the debt incurred? 5/2012 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Morgantown West Virginia 26501 City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | 블 | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | 님 | Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts | |
| | Is the claim subject to offset? | Collection; Collecting for ORIGINAL CREDITOR: 06 | |
| | <u>✓</u> No | PROGRESSIVE INSURANCE | |
| | Yes | Other. Specify COMPANY | |

Yes

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Debtor 1 Trisshauna Daniels Case number (if known) Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuation | Page | |
|--------|---|---|-------------|
| | After listing any entries on this page, number them beginning wit | h 4.5, followed by 4.6, and so forth. | Total claim |
| 4.7 | CREDIT MANAGEMENT LP | Last 4 digits of account number 4409 | \$403.00 |
| | Nonpriority Creditor's Name PO Box 118288 | When was the debt incurred? 2/2015 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Carrollton Texas 75011 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | 001 Collection; Collecting for ORIGINAL CREDITOR: WOW | |
| | ✓ No | Other. Specify INTERNET CABLE PHONE - 1 | |
| | Yes | | |
| 4.8 | Enterprise Car Rental | Last 4 digits of account number | \$500.00 |
| | Nonpriority Creditor's Name 5012 E. Central Texas Expy | When was the debt incurred? n/a | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Killeen Texas 76543 | Unliquidated | |
| | City State Zip Code | Disputed | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts | |
| | Is the claim subject to offset? | Other. Specify Unsecured | |
| | ✓ No | | |
| | Yes | | |
| 4.9 | MONTEREY FINANCIAL SVC | Last 4 digits of account number 9598 | \$2,391.00 |
| | Nonpriority Creditor's Name 4095 AVENIDA DE LA PLATA | When was the debt incurred? 1/2017 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. Contingent | |
| | OCEANSIDE California 92056 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | ✓ Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify 012 Lease | |
| | ✓ No | | |
| | Yes | | |

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Debtor 1 Trisshauna Daniels Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 **Peak Properties** \$3,325.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2201 West Roscoe Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60618 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ 2013-M1-704810 Is the claim subject to offset? **✓** No Yes People's Gas \$800.00 4.11 Last 4 digits of account number _ Nonpriority Creditor's Name 130 E. Randolph Drive When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60601 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Utility Other. Specify _ Is the claim subject to offset? **✓** No Yes PLS - Bankruptcy 4.12 \$1.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 800 Jorie Blvd 2nd Floor n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60523 Oak Brook Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Notice Only Is the claim subject to offset?

✓ No Yes

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Debtor 1 Trisshauna Daniels Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 Sprint \$700.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 219554 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 64121 Kansas City Missouri City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify __ DUE Is the claim subject to offset? **✓** No Yes 4.14 US Bank \$1.00 Last 4 digits of account number _ Nonpriority Creditor's Name n/a PO BOX 130 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **HILLSBORO** Ohio 45133 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Notice Only Other. Specify ___ Is the claim subject to offset? **✓** No Yes WEBBANK/FINGERHUT FRES 4.15 \$100.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 10/2016 6250 RIDGEWOOD RD Number Street As of the date you file, the claim is: Check all that apply. Contingent SAINT CLOUD 56303 Minnesota Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ 006 InstallmentLoan Is the claim subject to offset?

✓ No Yes

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| Debtor | 1 Trisshauna | | | Daniels | Case number (if known) | |
|---------|---|---------------------|-----------------|-------------------|---|-------------|
| | First Name | Middle I | Name | Last Name | | · |
| Part 2: | Your NONPRIOR | ITY Unsecured | l Claims - Cont | inuation Page | | |
| | After listing any entr | ies on this page, ı | number them beç | ginning with 4.5, | followed by 4.6, and so forth. | Total claim |
| 4.16 | Williams, Karen | | | Last | 4 digits of account number | \$2,650.00 |
| | Nonpriority Creditor's I 12001 S Perry | Name | | | n was the debt incurred? | |
| | | treet | | | She data was file the alaim in Observation with at another | |
| | | | | | f the date you file, the claim is: Check all that apply. Contingent | |
| | | | | = | | |
| | Chicago | Illinois | 60628 | | Jnliquidated | |
| | City | State | Zip Code | Ш , | Disputed | |
| | Who incurred the del | bt? Check one. | | Туре | of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | | | Student loans | |
| | Debtor 1 and Deb | tor 2 only | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | At least one of the | debtors and anoth | ner | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this cla | im relates to a co | mmunity debt | | Other. Specify 2015-M1-704944 | |
| | Is the claim subject | to offset? | | يت. | | |
| | ✓ No | | | | | |
| | Yes | | | | | |

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| ebtor 1 | Trisshauna | | | Daniels | Case number (if known) | | | |
|------------------------|-----------------------------------|------------------------------------|--|--|---|--|--|--|
| | First Name | 1 | Middle Name | Last Name | | | | |
| art 3: | List Others to | Be Notified A | bout a Debt That \ | You Already List | ted | | | |
| colle colle cred | ection agency is ection agency he | trying to collectre. Similarly, if | et from you for a debt you have more than | t you owe to some one creditor for an be notified for any | y, for a debt that you already listed in Parts 1 or 2. For example, if a cone else, list the original creditor in Parts 1 or 2, then list the any of the debts that you listed in Parts 1 or 2, list the additional y debts in Parts 1 or 2, do not fill out or submit this page. | | | |
| Nam | ie | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | |
| 852 | 52 W ARMITAGE | | | | of (Check Part 1: Creditors with Priority Unsecured Claims | | | |
| Nur | imber Street | | <u> </u> | one): Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Chi | cago | Illinois | 60614 | Last A digits of | of account number | | | |
| | | | | | of account number | | | |

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Debtor 1 Trisshauna Daniels Case number (if known)

| First Nar | ne Middle Name Last Name | | | |
|--------------------------|--|-------|---------------------------|---------|
| Part 4: Add th | ne Amounts for Each Type of Unsecured Claim | | | |
| | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | for s | tatistical reporting purp | oses on |
| | | | Total claims | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | |
| | 6b. Taxes and certain other debts you owe the government | | \$0.00 | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | |
| | 6d. Other. Add all other priority unsecured claims. Write that | | \$0.00 | |
| | amount here. 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 | |
| | oe. Total. Add filles of tillough od. | oe. | | |
| | | | Total claims | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$0.00 | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write | 6i. | \$13,906.00 | |
| | that amount here. | | | |
| | 6i. Total. Add lines 6f through 6i. | 6i. | \$13,906.00 | 1 |

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| Fill in this infor | mation to identify your c | ase: | | | | |
|---------------------------|---------------------------|-------------|------------------------------|--|--|--|
| Debtor 1 | Trisshauna | | Daniels | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case number (If known) | | | (200) | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or comp | any with whom you have | the contract or lease | State what the contract or lease is for |
|--------------------------------------|------------------------|-----------------------|---|
| Woodlawn Comr Name 740 E. 43rd | nunity Development | | Residential Lease, Debtor is Lessee, 1 Year Residential Lease |
| Number | Street | | |
| Chicago | Illinois | 60619 | |
| City | State | Zip Code | |

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| | | | Do | cument rag | jc 33 (| 51 7 6 |
|------------------|------------------------|---------------------------|---|---------------------------|-------------|---|
| Fill in | this infor | mation to identify your o | ase: | | | |
| Debte | or 1 | Trisshauna | | Daniels | | _ |
| | | First Name | Middle Name | Last Name | | |
| Debte (Spous | or 2 se, if filing) | First Name | Middle Name | Last Name | | - |
| Unite | d States E | ankruptcy Court for the: | Northern | District of Illinois | | |
| | | , | | (State) | | - |
| Case (If know | number wn) | | | | | - |
| ` | • | | | | | Check if this is an |
| | | | | | | amended filing |
| Off | icial | Form 106H | | | | |
| | | | | | | |
| Scr | redul | e H: Your Cod | lebtors | | | 12/15 |
| know | n). Answe | r every question. | tach the Additional Page | | | ny Additional Pages, write your name and case number (if |
| | | | lived in a community pro kico, Puerto Rico, Texas, W | | | munity property states and territories include Arizona, California, |
| [| ✓ No. (| Go to line 3. | | | | |
| ĺ | Yes. | Did your spouse, forme | er spouse, or legal equiva | lent live with you at the | e time? | |
| | | No | | | | |
| | | Yes. In which communit | y state or territory did you | ı live? | Fill | in the name and current address of that person. |
| | | | | | | |
| | | Name of your spouse, f | ormer spouse, or legal equ | valent | | |
| | | Number Street | | | | |
| | | City | State | Zip C | ode | |
| | | • | | • | | |
| 3. I | n Column | 1, list all of your codel | otors. Do not include you | spouse as a codebto | r if your s | spouse is filing with you. List the person shown in line 2 |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line a again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| Fill in this i | nformation to identify | your case: | | | | | | |
|----------------------------|--|--|---|------------------------|----------|---------------------|--|--------------------|
| Debtor 1 | Trisshauna | | Daniel | s | | | | |
| | First Name | Middle Name | Last N | | | — Che | eck if this is: | |
| Debtor 2 | ng) | NA * J 11 N N I | | | | | An amended filing | |
| (Spouse, it till | ^{ng)} First Name | Middle Name | Last N | ame | | | G | natition about a 1 |
| | es Bankruptcy Court for | Northern | _ District of Illi | | | | A supplement showing post- expenses as of the following | |
| the: Case numb | er | | (5 | State) | | | , | |
| (If known) | · - | | | | | | MM / DD / YYYY | |
| Officia | Form 106I | | | | | | | |
| Sched | ule I: Your In | come | | | | | | 12/1 |
| spouse. If n number (if | | l, attach a separate she y question. | | | - | | not include information a ional pages, write your n | - |
| • | our employment | | Debtor 1 | | | | Debtor 2 | |
| informa | tion. | Employment status | Emplo | wod | | | Employed | |
| • | ave more than one job, separate page with | , , | | Employed Not Employed | | | Not Employed | |
| | ion about additional | Occupation | | mployou | | | The Employee | |
| | part time, seasonal, or bloyed work. | Employer's name | Thresholds | | | | | |
| Occupa | tion may include student | Employer's address | 4101 N Ravenswood Avenue Number Street | | | nue | | |
| • | emaker, if it applies. | | | | | | Number Street | |
| | | | | | | | | |
| | | | Chicago | II | inois | 60613 | | |
| | | | City | S | tate | Zip Code | City State | Zip Code |
| | | How long employed there? | - | | | | | |
| Part 2: 0 | ive Details About N | Nonthly Income | | | | | | |
| Estimate i | | <u> </u> | n. If you have | nothing | to rep | ort for any line, v | write \$0 in the space. Include | e your non-filing |
| | our non-filing spouse have e, attach a separate she | | combine the | informa | tion for | all employers fo | or that person on the lines be | low. If you need |
| | | | | | For | Debtor 1 | For Debtor 2 or non-filing spouse | |
| | | ary, and commissions (befo , calculate what the monthly | | 2. | | \$2,166.67 | | |
| 3. Estim | ate and list monthly ove | rtime pay. | | 3 | | + \$0.00 | | |
| 4. Calcu | late gross income. Add l | ine 2 + line 3. | | 4. | | \$2,166.67 | | |

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| Debtor 1Trisshauna | Daniels | Case number | (if | |
|--|-----------------------|---------------------------|-----------------------------------|-------------------------|
| First Name Middle Name | Last Name | known) For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Copy line 4 here | → 4. | \$2,166.67 | non-ining spouse | |
| 5. List all payroll deductions: | | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$0.00 | | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$0.00 | | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$0.00 | - | |
| 5d. Required repayments of retirement fund loans | 5d. | \$0.00 | | |
| 5e. Insurance | 5e. | \$0.00 | | |
| 5f. Domestic support obligations | 5f. | \$0.00 | | |
| 5g. Union dues | | \$0.00 | | |
| · · | 5g. | | | |
| 5h. Other deductions. Specify: | | \$0.00 + | | |
| 6. Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + +5h$. | 5f + 5g 6. | \$0.00 | | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from lin | ne 4. 7. | \$2,166.67 | | |
| 8. List all other income regularly received: | | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm | | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, an | d | | | |
| the total monthly net income. | 8a. | \$0.00 | | |
| 8b. Interest and dividends | 8b. | \$0.00 | | |
| 8c. Family support payments that you, a non-filing spouse, o dependent regularly receive | ra | | | |
| Include alimony, spousal support, child support, maintenance divorce settlement, and property settlement. | e, 8c. | \$520.00 | | |
| 8d. Unemployment compensation | 8d. | \$0.00 | | |
| 8e. Social Security | 8e. | \$0.00 | | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefit under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: | ts 8f. | \$0.00 | | |
| 8g. Pension or retirement income | 8g. | \$0.00 | - | |
| 8h. Other monthly income. Specify: | 8h. + | \$0.00 + | | |
| 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g | | \$520.00 | | |
| 3. Add all other modile rad lines out 1 ab 1 ac 1 ac 1 ac 1 ac 1 | | \$320.00 | | |
| 10.Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing | 10. spouse | \$2,686.67 | = | \$2,686.67 |
| 11. State all other regular contributions to the expenses that yellocular contributions from an unmarried partner, members of you friends or relatives. Do not include any amounts already included in lines 2-10 or am | ur household, your d | ependents, your roomm | | |
| Specify: | carro mar aro not a | anazio to pay onponisti i | 11. + | \$0.00 |
| | | | | |
| 12. Add the amount in the last column of line 10 to the amount Write that amount on the Summary of Schedules and Statistical S | | | | \$2,686.67 |
| | | | | Combined monthly income |
| 13. Do you expect an increase or decrease within the year afte | r you file this form? | | | |
| No. | | | | |
| Voc. Evolein: | | | | |
| Yes. Explain: | | | | |
| | | | | |

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| | | Duc | ument Page 30 of 70 | , | | |
|---------------------------------|--|---|---|-------------------|--|-------------|
| Fill in this info | rmation to identif | y your case: | | | | |
| Debtor 1 | Trisshauna | | Daniels | | | |
| | First Name | Middle Name | Last Name | Check if this is: | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | An amended fill | ing | |
| United States I | Bankruptcy Court | | District of Illinois | | showing post-petit the following date | |
| Case number | | | (State) | · | | |
| (If known) | | | _ | MM / DD / YYY | Y | |
| Official | Form 10 | <u>6J</u> | | | | |
| Schedul | e J: Your | Expenses | | | | 12/15 |
| information. If (if known). Ans | | | | | | umber |
| 1. Is this a jo | | 40011014 | | | | |
| | o to line 2 | | | | | |
| | | e in a separate household? | | | | |
| | | e ili a separate nousenoiu: | | | | |
| ļ . | No | | | _ | | |
| | | must file Official Forms 106J-2, Expe | nses for Separate Household of Debi | or 2. | | |
| 2. Do you hav | ve dependents? | No | | | | |
| Do not list I Debtor 2. | Debtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does depend with you? | ent live |
| | | | Child | 14 years | No. ✓ Yes. | |
| | | | Child | 9 years | Yes. | |
| | | | <u> </u> | <u> </u> | ✓ Yes. | |
| | | | Child | 7 years | No. | |
| | | | | | Yes. | |
| _ | penses include of people other | ✓ No | | | | |
| yourself an dependent | | Yes | | | | |
| Part 2: Esti | mate Your On | going Monthly Expenses | | | | |
| - | of a date after th | your bankruptcy filing date unless e bankruptcy is filed. If this is a su | | | - | |
| | • | h non-cash government assistance luded it on <i>Schedule I: Your Incom</i> | - | | Yo | ur expenses |
| | I or home owner or the ground or le | ship expenses for your residence. I ot. 4. | nclude first mortgage payments and | | 4. | \$650.00 |
| If not inc | luded in line 4: | | | | | |
| 4a. Real e | estate taxes | | | | 4a | \$0.00 |
| 4b. Prope | erty, homeowner's | , or renter's insurance | | | 4b. | \$0.00 |

4c.

4d.

\$0.00

\$0.00

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Trisshauna Daniels Case number (if known) Last Name

| riistivaine | Middle Name Last Name | | |
|---|--|------------|------------------|
| | | | Your expenses |
| 5. Additional mortgage paymer | ts for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | | |
| 6a. Electricity, heat, natural gas | | 6a. | \$225.00 |
| 6b. Water, sewer, garbage coll | ection | 6b. | \$0.00 |
| 6c. Telephone, cell phone, Inte | ernet, satellite, and cable services | 6c. | \$210.00 |
| 6d. Other. Specify: | | 6d | \$0.00 |
| 7. Food and housekeeping supp | blies | 7. | \$750.00 |
| 8. Childcare and children's edu | cation costs | 8. | \$170.00 |
| 9. Clothing, laundry, and dry cl | eaning | 9. | \$100.00 |
| 10. Personal care products and | services | 10. | \$75.00 |
| 11. Medical and dental expense | es | 11. | \$100.00 |
| 12. Transportation. Include gas, Do not include car payments | maintenance, bus or train fare. | 12. | \$181.00 |
| 13. Entertainment, clubs, recre | ation, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions an | d religious donations | 14. | \$150.00 |
| 15. Insurance. Do not include insurance dedu | cted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | | 15a | \$120.00 |
| 15b. Health insurance | | 15b | \$0.00 |
| 15c. Vehicle insurance | | 15c | \$0.00 |
| 15d. Other insurance. Specify: | | 15d | \$0.00 |
| 16. Taxes. Do not include taxes of | leducted from your pay or included in lines 4 or 20. | | |
| Specify: | | 16 | \$0.00 |
| 17. Installment or lease payme | nts: | 10 | |
| 17a. Car payments for Vehicle | | 17a | \$0.00 |
| 17b. Car payments for Vehicle | 2 | 17b | \$0.00 |
| 17c. Other. Specify: | | 17c | \$0.00 |
| | | 17d | \$0.00 |
| | maintenance, and support that you did not report as deducted from | | \$0.00 |
| | e I, Your Income (Official Form 106I). | 18. | |
| | o support others who do not live with you. | | |
| Specify: | and included in the A. o. C. of this farm an an Oakadula I. Varm Income | 19. | \$0.00 |
| 20. Other real property expense 20a. Mortgages on other prop | s not included in lines 4 or 5 of this form or on Schedule I: Your Income. | 202 | \$0.00 |
| 20b. Real estate taxes. | y | 20a 20b | \$0.00 \$0.00 |
| 20c. Property, homeowner's, | or renter's insurance | | |
| 20d. Maintenance, repair, and | | 20c 20d | \$0.00 \$0.00 |
| 20e. Homeowner's association | | | |
| 200. Homoowner 3 association | i oi oondominam duoo | 20e | \$0.00 |

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| Debtor 1 Triss | | | Daniels | Case number (if known) | | |
|-----------------------|------------------------------|------------------------|---|------------------------|-----|------------|
| First I | Name | Middle Name | Last Name | | | |
| 21. Other. Spe | cify: | | | | 21 | \$0.00 |
| | | | | | | |
| | your monthly expenses. | | | | | \$2,731.00 |
| | nes 4 through 21. | | | | | \$0.00 |
| . , | ` , , | ,, ,, | from Official Form 106J-2 | | | \$2,731.00 |
| 22c. Add lir | ne 22a and 22b. The resul | t is your monthly expe | enses. | | 22. | |
| 23. Calculate | your monthly net income | е. | | | | |
| 23a. Copy | line 12 (your combined m | onthly income) from S | schedule I. | | 23a | \$2,686.67 |
| 23b. Copy | your monthly expenses fro | om line 22 above. | | | 23b | \$2,731.00 |
| | act your monthly expenses | | come. | | | (\$44.33) |
| The re | esult is your monthly net in | ncome. | | | 23c | |
| For examp | ble, do you expect to finish | paying for your car lo | es within the year after an within the year or do you odification to the terms of | ou expect your | | |

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| Fill in this infor | mation to identify your ca | ase: | | |
|---------------------------|----------------------------|-------------|------------------------------|----------|
| Debtor 1 | Trisshauna | | Daniels | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | <u> </u> |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | |
| Case number (If known) | | | (Otato) | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

If two married people are filing together, both are equally responsible for supplying correct information.

12/15

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Pari | 1: Sign Below | |
|------|--|---|
| | Did you pay or agree to pay someone who is NOT an attorney to | help you fill out bankruptcy forms? |
| | ✓ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and |
| × | /s/ Trisshauna Daniels | × |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 8/2/2017 MM/DD/YYYY | Date MM/DD/YYYY |

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| Fill in t | this infor | mation to identify your c | ase: | | | | | |
|------------------|-------------------------|---|-------------------------------|--|----------------------|---------|----------|-----------------------------------|
| Debto | r 1 | Trisshauna First Name | Middle N | Daniels Name Last Nar | me | | | |
| Debto (Spouse | r 2 e, if filing) | First Name | Middle N | Name Last Nar | me | | | |
| United | States E | ankruptcy Court for the: | Northern | District of Illin | | | | |
| Case r | number n) | | | (Sta | ate) | | | |
| Offi | cial | Form 107 | | | | _ | | Check if this is a amended filing |
| Stat | eme | nt of Financia | l Affairs f | or Individuals | Filing for | Bankru | ptcy | 04/10 |
| inform numb | nation. I er (if kno | f more space is neede own). Answer every q | ed, attach a sepa uestion. | arried people are filing arate sheet to this form | n. On the top of a | | | |
| Part 1 | Give | Details About Your | waritai Status | and Where You Lived | a before | | | |
| 1. | | your current marital sta | atus? | | | | | |
| | | ried married | | | | | | |
| 2. | During t | he last 3 years, have yo | u lived anywhere | e other than where you l | ive now? | | | |
| | ☐ No ✓ Yes | . List all of the places yo | ou lived in the last | : 3 years. Do not include | where you live no | w. | | |
| | Deb | tor 1: | | Dates Debtor 1 lived there | Debtor 2: | | | Dates Debtor 2 lived there |
| | | | | | Same as D | ebtor 1 | | Same as Debtor 1 |
| | | 1 S Clyde Ave nber Street | | From | Number Street | | | From |
| | Chic City | cago Illinois State | 60649 Zip Code | | City | State | Zip Code | |
| | | | | | Same as D | ebtor 1 | | Same as Debtor 1 |
| | Nun | nber Street | | From | Number Street | | | From To |
| | City | State | Zip Code | | City | State | Zip Code | |
| aı | nd territor No | <i>ries</i> include Arizona, Califo | ornia, Idaho, Louis | ouse or legal equivalent iana, Nevada, New Mexico Codebtors (Official Form | o, Puerto Rico, Texa | | | mmunity property states |

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Daniels Debtor 1 Trisshauna Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$7331.94 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$27802.00 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, For the calendar year before that: commissions, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

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Daniels Debtor 1 Trisshauna Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or

vendors
Other

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| tor 1 | Trisshauna | | | Dar | niels | Case number (| (if known) |
|--------------------|--|------------|--|--|---|---|---|
| | First Name | | Middle Name | Last | Name | - | |
| Insi com age | If thin 1 year before you filed for bankruptcy, disiders include your relatives; any general partners or porations of which you are an officer, director, gent, including one for a business you operate as such as child support and alimony. | | ; relatives of any operson in control, | general partners; part or owner of 20% or | nerships of which y more of their voting | ou are a general partner; securities; and any managing | |
| ✓ | No | | | | | | |
| | Yes. List all pay | ments to a | n insider. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| - | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| insi | der? ude payments on No | debts guar | ranteed or cosigner | d by an insider. | Total amount paid | Amount you still owe | n account of a debt that benefited an Reason for this payment Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | | | | | | | |
| | Number Street | | | | | | |

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Debtor 1 Trisshauna Daniels Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title CONTRACT Cook County Circuit Court Pending Court Name On appeal 50 West Washington Street Case number NumberStreet Concluded 2016-M1-105152 Illinois 60602 Chicago City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | otor 1 Trisshauna | Daniels | Case number (if known) | |
|------|--|------------------------------|--|------------------------|
| | First Name Middle Name | Last Name | <u> </u> | |
| 11. | Within 90 days before you filed for bankruptcy, did accounts or refuse to make a payment because you | | ank or financial institution, set off any am | ounts from your |
| | ✓ No | | | |
| | Yes. Fill in the details. | | | |
| | | Describe the action the | creditor took Date action was taken | Amount |
| | Creditor's Name | | | |
| | Number Street | | | |
| | | Last 4 digits of account n | umber: XXXX- | |
| | City State Zip Code | | | |
| 12. | Within 1 year before you filed for bankruptcy, was a appointed receiver, a custodian, or another official? | | ossession of an assignee for the benefit o | of creditors, a court- |
| | ☑ No | | | |
| | Yes | | | |
| Part | t 5: List Certain Gifts and Contributions | | | |
| 13. | Within 2 years before you filed for bankruptcy, did | you give any gifts with a to | tal value of more than \$600 per person? | |
| | ✓ No ☐ Yes. Fill in the details for each gift. | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | | | _ |
| | Person to Whom You Gave the Gift | | | |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |
| | Person to Whom You Gave the Gift | | | |
| | | | | |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |

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| Debto | or 1 | Trisshauna | | Daniels | Case number (if known | 1) | |
|--------|-------------|--|--|---|--------------------------------|-----------------------------------|----------------------|
| | | First Name Midd | le Name | Last Name | | | |
| | | | | | | | |
| 14. | Witl | hin 2 years before you filed for ban | kruptcy, did yoı | u give any gifts or contrib | outions with a total value o | f more than \$600 | to any charity? |
| | 7 | No | | | | | |
| | Ÿ | Yes. Fill in the details for each gift of | or contribution | | | | |
| | Ш | - | | | | | |
| | | Gifts or contributions to charities | • | Describe what you cont | ributed | Date you | Value |
| | | that total more than \$600 | | | | contributed | |
| | | | | | | | |
| | | Charity's Name | | | | | |
| | | • | | | | | |
| | | | | | | | |
| | | Number Street | _ | | | | |
| | | | | | | | |
| | | City State Z | ip Code | | | | |
| | | | | | | | |
| Part 6 | 6: | List Certain Losses | | | | | |
| | | | | | | | |
| 15. | With | hin 1 year before you filed for bank | ruptcy or since | you filed for bankruptcy, | did you lose anything beca | ause of theft, fire, | other disaster, or |
| | | nbling? | | | | | |
| - | | No | | | | | |
| | ⊻ | | | | | | |
| | | Yes. Fill in the details. | | | | | |
| | | Describe the property you lost and | d | Describe any insurance | coverage for the loss | Date of your | Value of property |
| | | how the loss occurred | | Include the amount that i | | loss | lost |
| | | | | pending insurance claims | on line 33 of <i>Schedule</i> | | |
| | | | | A/B: Property. | | | |
| | | | | | | | |
| | | | _ | | | | |
| | | | | | | | |
| 16. | With | List Certain Payments or Tran hin 1 year before you filed for bank | ruptcy, did you | | your behalf pay or transfe | r any property to a | anyone you consulted |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No | ruptcy, did you g a bankruptcy | petition? | | | anyone you consulted |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attomeys, bankruptcy petition | ruptcy, did you g a bankruptcy | petition? edit counseling agencies fo | r services required in your ba | nkruptcy. | |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No | ruptcy, did you g a bankruptcy | petition? | r services required in your ba | Date payment or transfer | Amount of payment |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attomeys, bankruptcy petition No Yes. Fill in the details. | ruptcy, did you g a bankruptcy | petition? edit counseling agencies for Description and value of transferred | r services required in your ba | Date payment or transfer was made | Amount of payment |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No Yes. Fill in the details. | ruptcy, did you g a bankruptcy | petition? edit counseling agencies fo Description and value o | r services required in your ba | Date payment or transfer | Amount of |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | ruptcy, did you g a bankruptcy | petition? edit counseling agencies for Description and value of transferred | r services required in your ba | Date payment or transfer was made | Amount of payment |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street | ruptcy, did you g a bankruptcy | petition? edit counseling agencies for Description and value of transferred | r services required in your ba | Date payment or transfer was made | Amount of payment |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street | ruptcy, did you g a bankruptcy | petition? edit counseling agencies for Description and value of transferred | r services required in your ba | Date payment or transfer was made | Amount of payment |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street | ruptcy, did you g a bankruptcy | petition? edit counseling agencies for Description and value of transferred | r services required in your ba | Date payment or transfer was made | Amount of payment |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor | ruptcy, did you g a bankruptcy | petition? edit counseling agencies for Description and value of transferred | r services required in your ba | Date payment or transfer was made | Amount of payment |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois | ruptcy, did you g a bankruptcy n preparers, or cr | petition? edit counseling agencies for Description and value of transferred | r services required in your ba | Date payment or transfer was made | Amount of payment |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois | ruptcy, did you g a bankruptcy n preparers, or cri | petition? edit counseling agencies for Description and value of transferred | r services required in your ba | Date payment or transfer was made | Amount of payment |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois & City State Zi Email or website address | ruptcy, did you g a bankruptcy n preparers, or cri | petition? edit counseling agencies for Description and value of transferred | r services required in your ba | Date payment or transfer was made | Amount of payment |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 6 City State Zi Email or website address None | ruptcy, did you g a bankruptcy n preparers, or cre society | petition? edit counseling agencies for Description and value of transferred | r services required in your ba | Date payment or transfer was made | Amount of payment |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois & City State Zi Email or website address | ruptcy, did you g a bankruptcy n preparers, or cre society | petition? edit counseling agencies for Description and value of transferred | r services required in your ba | Date payment or transfer was made | Amount of payment |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 6 City State Z Email or website address None Person Who Made the Payment, if N | ruptcy, did you g a bankruptcy n preparers, or cre society | petition? edit counseling agencies for Description and value of transferred | r services required in your ba | Date payment or transfer was made | Amount of payment |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 6 City State Zi Email or website address None | ruptcy, did you g a bankruptcy n preparers, or cre society | petition? edit counseling agencies for Description and value of transferred | r services required in your ba | Date payment or transfer was made | Amount of payment |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 6 City State Zi Email or website address None Person Who Made the Payment, if N | ruptcy, did you g a bankruptcy n preparers, or cre society | petition? edit counseling agencies for Description and value of transferred | r services required in your ba | Date payment or transfer was made | Amount of payment |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 6 City State Z Email or website address None Person Who Made the Payment, if N | ruptcy, did you g a bankruptcy n preparers, or cre society | petition? edit counseling agencies for Description and value of transferred | r services required in your ba | Date payment or transfer was made | Amount of payment |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 6 City State Zi Email or website address None Person Who Made the Payment, if N | ruptcy, did you g a bankruptcy n preparers, or cre society | petition? edit counseling agencies for Description and value of transferred | r services required in your ba | Date payment or transfer was made | Amount of payment |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 6 City State Zi Email or website address None Person Who Made the Payment, if N Person Who Was Paid Number Street | ruptcy, did you g a bankruptcy n preparers, or creating a bankruptcy n preparers, or creating a bankruptcy n preparers, or creating a bankruptcy n preparers no creating a bankruptcy n preparers n preparers no creating a bankruptcy n preparers n prepare | petition? edit counseling agencies for Description and value of transferred | r services required in your ba | Date payment or transfer was made | Amount of payment |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 6 City State Zi Email or website address None Person Who Made the Payment, if N Person Who Was Paid Number Street | ruptcy, did you g a bankruptcy n preparers, or cre society | petition? edit counseling agencies for Description and value of transferred | r services required in your ba | Date payment or transfer was made | Amount of payment |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 6 City State Zi Email or website address None Person Who Made the Payment, if N Person Who Was Paid Number Street | ruptcy, did you g a bankruptcy n preparers, or creating a bankruptcy n preparers, or creating a bankruptcy n preparers, or creating a bankruptcy n preparers no creating a bankruptcy n preparers n preparers no creating a bankruptcy n preparers n prepare | petition? edit counseling agencies for Description and value of transferred | r services required in your ba | Date payment or transfer was made | Amount of payment |
| 16. | With abo | hin 1 year before you filed for bank ut seeking bankruptcy or preparing ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 6 City State Zi Email or website address None Person Who Made the Payment, if N Person Who Was Paid Number Street | ruptcy, did you g a bankruptcy n preparers, or creating a bankruptcy n preparers, or creating a bankruptcy n preparers, or creating a bankruptcy n preparers no creating a bankruptcy n preparers n preparers no creating a bankruptcy n preparers n prepare | petition? edit counseling agencies for Description and value of transferred | r services required in your ba | Date payment or transfer was made | Amount of payment |

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| Debtor 7 | Trisshauna | | Daniels | Case ni | umber <i>(if known)</i> | | | |
|----------|--|----------------|--|---------------|-------------------------|--|-----------|------------------------------|
| | First Name | Middle Name | Last Name | | | | | |
| he | thin 1 year before you filed for be Ip you deal with your creditors on the not include any payment or transf | r to make paym | ents to your creditors? | our behalf pa | ay or transfer a | any property to a | anyone v | who promised to |
| ✓ | No Yes. Fill in the details. | | | | | | | |
| | res. I iii ii i die details. | | | | | | | |
| | | | Description and value of a transferred | ny property | | Date payment or transfer was made | Amou | nt of payment |
| | Person Who Was Paid | | - | | | | | |
| | Number Street | | | | | | | |
| | | | • | | | | | |
| | City State | Zip Code | | | | | | |
| <u>√</u> | d transfers that you have already lis No Yes. Fill in the details. | and Guide | Description and value of p | property | Describe any | property or | | Date |
| | | | transferred | Toperty | | ceived or debts p | paid | transfer was made |
| | Person Who Received Transfer | | • | | | | | |
| | Number Street | | | | | | | |
| | City State Person's relationship to you | Zip Code | - | | | | | |
| | Person Who Received Transfer | | - | | | | | |
| | Number Street | | | | | | | |
| | City State Person's relationship to you | Zip Code | | | | | | |
| be | thin 10 years before you filed for neficiary? | | d you transfer any property to | a self-settle | d trust or simi | lar device of wh | ich you a | are a |
| <u> </u> | No Yes. Fill in the details. | | | | | | | |
| _ | 1 | | Description and value of | the property | y transferred | | | Date transfer was made |
| | Name of trust | | | | | | | |

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Daniels Debtor 1 Trisshauna Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred Checking XXXX-Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number

City

State

State

Zip Code

City

Zip Code

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Daniels Debtor 1 Trisshauna Case number (if known) Middle Name First Name Identify Property You Hold or Control for Someone Else Part 9: 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Deb | tor 1 | Trisshauna | | | Da | aniels | Cas | e number <i>(ii</i> | fknown) | | |
|------|-------|------------------------|------------------|--------------------|---------------|-----------------|----------------------|---------------------|---------------|-----------------|--------------------|
| | | First Name | | Middle Name | La | st Name | | | | | |
| 26. | Hav | e you been a part | y in any judic | cial or administr | ative proce | eding under | any environmen | ital law? In | clude settler | ments and ord | ers. |
| | H | Yes. Fill in the det | taile | | | | | | | | |
| | Ш | res. I III III ule dei | iaiis. | | _ | | | | | | |
| | | | | | Court or ag | ency | | Nature o | of the case | | Status of the case |
| | | Case title | | | | | | | | | Case |
| | | Case title | | | | | | | | | Pending |
| | | | | | Court Name | | | | | | |
| | | | | | Ni la au Chua | _1 | | | | | On appeal |
| | | Case number | | | NumberStre | et | | | | | Carreland and |
| | | | | | City | State | Zip Code | | | | Concluded |
| | | | | | City | State | Zip Code | | | | |
| Part | t 11: | Give Details Al | bout Your E | Business or Co | onnections | s to Any Bu | siness | | | | |
| | | | | | | | | | | | |
| 27. | With | nin 4 years before | you filed for | bankruptcy, did | l you own a | business or | have any of the | following c | onnections t | o any busines | s? |
| | | - | | | | | - | _ | | - | |
| | | A sole propri | ietor or self-e | mployed in a tra | ade, profess | sion, or other | r activity, either f | ull-time or p | oart-time | | |
| | | A member of | f a limited liab | oility company (L | LC) or limite | ed liability pa | artnership (LLP) | | | | |
| | | A partner in a | | | , | , , | , , | | | | |
| | | | - | | | | | | | | |
| | | _ | | ınaging executiv | - | | | | | | |
| | | An owner of | at least 5% c | of the voting or e | quity securi | ties of a corp | poration | | | | |
| | | | | 0 . 5 . 40 | | | | | | | |
| | ✓ | No. None of the a | | | | | | | | | |
| | | Yes. Check all that | at apply abo | ve and fill in the | details belo | w for each b | ousiness. | | | | |
| | | | | | Desci | ribe the natu | re of the busine | SS | Employer I | dentification | number Do not |
| | | | | | | | | | include So | cial Security r | number or ITIN. |
| | | | | | | | | | EIN: | | |
| | | Business Name | | | _ | | | | 2114. | | |
| | | | | | _ | | | | | | |
| | | Number Street | | | | | | | Dates busi | ness existed | |
| | | | | | Name | of account | ant or bookkeep | er | | | |
| | | City | State | Zip Code | | | | | From | To | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | Desci | ribe the natu | re of the busine | ss | Employer I | dentification | number Do not |
| | | | | | | | | | include So | cial Security r | number or ITIN. |
| | | - | | | | | | | EIN: | | |
| | | Business Name | | | | | | | | | |
| | | | | | _ | | | | D. I | | |
| | | Number Street | | | | | | | Dates busi | ness existed | |
| | | - | | | Name | of account | ant or bookkeep | er | | | |
| | | City | State | Zip Code | | | | | From | To | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | Desci | ribe the natu | re of the busine | SS | Employer I | dentification i | number Do not |
| | | | | | | | | | include So | cial Security r | number or ITIN. |
| | | | | | | | | | EIN: | | |
| | | Business Name | | | | | | | | | |
| | | | | | _ | | | | | | |
| | | Number Street | | | | | | | Dates busi | ness existed | |
| | | | | | Name | of account | ant or bookkeep | er | | | |
| | | City | State | Zip Code | | | | | From | То | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

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| Debt | tor 1 | Trisshauna | | | Daniels | Case number (if known) |
|------|------------|---|---------------------------|-----------------------|------------------------------|---|
| | | First Name | | Middle Name | Last Name | |
| 28. | | nin 2 years before y ditors, or other par No Yes. Fill in the deta | rties. | bankruptcy, did you | u give a financial stateme | nt to anyone about your business? Include all financial institutions, |
| | | | | | Date issued | |
| | | - | | | - | |
| | | Name | | | MM/DD/YYYY | |
| | | Number Street | | | | |
| | | | | | | |
| | | City | State | Zip Code | • | |
| Part | 10. | Sign Below | | | | |
| | | kruptcy case can | result in find | es up to \$250,000, c | | ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | /S/ | Trisshauna Dure of Debtor | | | Signature of Debtor 2 |
| | | Signate | are or Debtor | • | | Date |
| | | Date 8 | 8/2/2017 | | | Date |
| | Did yo | ou attach addition | al pages to | Your Statement of F | inancial Affairs for Individ | luals Filing for Bankruptcy (Official Form 107)? |
| | - · | lo | | | | |
| | ≌. | | | | | |
| L | ' | es | | | | |
| | Did yo | ou pay or agree to | pay someor | ne who is not an att | orney to help you fill out b | ankruptcy forms? |
| Į. | √ N | lo | | | | |
| Ì | = ' | es. Name of person | 1 | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| Fill in this information to identify your case: | | | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|--|--|
| Debtor 1 | Trisshauna | | Daniels | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| United States E | Sankruptcy Court for the: | Northern | District of Illinois (State) | | | | | |
| Case number (If known) | | | (State) | | | | | |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

| 1. | For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. | | | | |
|----|---|--|---|--|--|
| | Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | |

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| Debtor | Trisshauna | | Daniels | Case number | (if |
|---------|--|------------------------|------------------------|-----------------------------|--|
| 1 | First Name | Middle Name | Last Name | known) | <u> </u> |
| Part 2: | List Your Unexpired Pers | onal Property Lease | s | | |
| | · · | | | v Contracts and Unevolu | red Leases (Official Form 106G), fill in the |
| informa | | tate leases. Unexpired | leases are leases that | are still in effect; the le | ase period has not yet ended. You may |
| Des | scribe your unexpired persona | I property leases | | | Will the lease be assumed? |
| Les | sor's name: | | | | ☐ No ☐ Yes |
| | scription of leased perty: | | | | |
| Les | sor's name: | | | | ☐ No ☐ Yes |
| | scription of leased perty: | | | | |
| Les | sor's name: | | | | □ No □ Yes |
| | scription of leased perty: | | | | |
| Les | sor's name: | | | | ☐ No ☐ Yes |
| | scription of leased perty: | | | | |
| Les | sor's name: | | | | ☐ No ☐ Yes |
| | scription of leased perty: | | | | |
| Les | sor's name: | | | | ☐ No ☐ Yes |
| | scription of leased perty: | | | | |
| Les | sor's name: | | | | ☐ No ☐ Yes |
| | scription of leased perty: | | | | |
| Part 3: | Sign Below | | | | |
| | er penalty of perjury, I declare erty that is subject to an une | | ny intention about any | property of my estate t | hat secures a debt and any personal |
| _ | /s/ Trisshauna Daniels | | × | | |
| Si | ignature of Debtor 1 | | Siç | gnature of Debtor 2 | |
| D | ate 8/2/2017 MM/DD/YYYY | | Da | MM/DD/YYYY | |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Nortnern L | District of Illinois | | | |
|-------|---|----------------------------|--|---------------------------------------|--|--|
| In re | Trisshauna Daniels | | Case No. | | | |
| _ | Debtor | | | (If known) | | |
| | | | Chapter | Chapter 7 | | |
| | DISCLOSURE OF | COMPENSA | TION OF ATTORNE | Y FOR DEBTOR | | |
| 1 | . Pursuant to 11 U.S.C. § 329(a) and compensation paid to me within one rendered or to be rendered on behal | e year before the filing o | of the petition in bankruptcy, or ag | | | |
| | For legal services, I have agreed to a | ccept | | \$1,250.00 | | |
| | Prior to the filing of this statement I | have received | | \$0.00 | | |
| | Balance Due | | | \$1,250.00 | | |
| 2 | . The source of the compensation pai | d to me was: | | | | |
| | ✓ Debtor | Other (sp | pecify) | | | |
| 3 | . The source of the compensation pai | d to me is: | | | | |
| | Debtor | Other (sp | pecify) | | | |
| 4 | 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. | | | | | |
| | | w firm. A copy of the ag | ion with a other person or persons greement, together with a list of th | | | |
| 5 | . In return for the above-disclosed fee | e, I have agreed to rende | er legal service for all aspects of th | e bankruptcy case, including: | | |
| | a. Analysis of the debtor's fina bankruptcy; | ncial situation, and rend | dering advice to the debtor in dete | rmining whether to file a petition in | | |
| | b. Preparation and filing of any | petition, schedules, sta | atements of affairs and plan which | may be required; | | |
| | c. Representation of the debto | r at the meeting of cred | itors and confirmation hearing, an | d any adjourned hearings thereof; | | |
| 6 | s. By agreement with the debtor(s), the | above-disclosed fee d | oes not include the following serv | ices: | | |
| | | | | | | |
| | | CER | TIFICATION | | | |
| | I certify that the foregoing is a completor(s) in this bankruptcy proceedings. | te statement of any agr | reement or arrangement for payme | nt to me for representation of the | | |
| | 8/2/2017 | | /s/ Chad Mizelle | | | |
| | Date | | Signature of Attorney | | | |
| | | | . = | | | |
| | | | Semrad Law Firm Name of law firm | | | |
| | | | Name of law little | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Daniels, Trisshauna | Case No | Case No. | | |
|-----------------|---|---|--------------------------------------|--|--|
| | Debtor(s) | Case NO | | | |
| | | Chapter | Chapter7 | | |
| | VERIFICAT | ION OF CREDITOR MA | TRIX | | |
| Th knowledge | ne above named Debtors hereby verify that e. | the attached list of creditors is t | rue and correct to the best of their | | |
| Date: | 8/2/2017 | /s/ Daniels, Tris: Daniels, Trissha Signature of De | una | | |

MONTEREY FINANCIAL SVC 4095 AVENIDA DE LA PLATA OCEANSIDE, CA, 92056

CREDIT MANAGEMENT LP PO Box 118288 Carrollton, TX, 75011

AM COLL SYS 1185 N BIXBY RD COLUMBUS, OH, 43213

CREDIT COLL 16 Distributor Drive, Suite 1 Morgantown, WV, 26501

WEBBANK/FINGERHUT FRES 6250 RIDGEWOOD RD SAINT CLOUD, MN, 56303

PLS - Bankruptcy PO Box 800849 Dallas, TX, 75380

Enterprise Car Rental 600 Corporate Park Dr Saint Louis, MO, 63105

People's Gas 130 E. Randolph Drive Chicago, IL, 60601

ComEd 3 Lincokln Cetre c/o Sabrina Copelan Villa Park, IL, 60181

Sprint P O Box 629023 El Dorado Hills, CA, 95762

Comcast p.o. box 196 Newark, NJ, 07101 Bank of America 1701 River Oaks Dr # D Calumet City, IL, 60409

US Bank PO BOX 5265 CN-OH-W5-DL Cincinnati, OH, 45201

Williams, Karen 12001 S Perry Chicago, IL, 60628

Peak Properties 2201 West Roscoe Chicago, IL, 60618

HUSBY MARVIN L III 852 W ARMITAGE Chicago, IL, 60614

Clerk of the Circuit Court 50 W Washington Chicago, IL, 60602

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| Debtor 1 Trisshauna First Name | ~- | niels Case n | number (if known) | |
|--|--|---|---|--|
| | estions for Reporting Purposes | it warne | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily or "incurred by an individual portion of the line 16b. Yes. Go to line 17. 16b. Are your debts primarily by | rimarily for a personal, famil usiness debts? <i>Business d</i> restment or through the ope | lebts are debts that you incurred to obtain eration of the business or investment. | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that fun | | y exempt property is excluded and administ e to unsecured creditors? | rative |
| 18. How many creditors do you estimate that you owe? | ☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 | |
| ^{19.} How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 mi \$10,000,001-\$50 n \$50,000,001-\$100 \$100,000,001-\$50 | nillion \$1,000,000,001-\$10 million \$10,000,000,001-\$50 | billion Dillion |
| 20. How much do you estimate your liabilities to be? | ▼ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 mi \$10,000,001-\$50 n \$50,000,001-\$100 \$100,000,001-\$500 | nillion \$1,000,000,001-\$10 million \$10,000,000,001-\$50 | billion |
| | I have examined this petition, and | I declare under penalty of p | perjury that the information provided is to | rue and |
| For you | correct. If I have chosen to file under Chap of title 11, United States Code. I u under Chapter 7. If no attorney represents me and I out this document, I have obtained I request relief in accordance with I understand making a false state | oter 7, I am aware that I may understand the relief availab did not pay or agree to pay d and read the notice requir the chapter of the 11, Unit ment, concealing property, or e can result in thes up to \$2 | proceed, if eligible, under Chapter 7, 11 le under each chapter, and I choose to p someone who is not an attorney to help | ,12, or 13 proceed o me fill n. |
| | /s/ Trisshauna Daniels | <u>(</u> | - | |
| | Signature of Debtor 1 | | Signature of Debtor 2 | |
| rational transport of the source of the sour | Executed on 8/2/2017 MM / DD / Y | YYYY | Executed onMM / DD / YYYY | |

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| Fill in this infor | mation to identify your c | ase: | | |
|---------------------------|---------------------------|-------------|------------------------------|-------------|
| Debtor 1 | Trisshauna | | Daniels | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Sankruptcy Court for the: | Northern | District of Illinois (State) | |
| Case number (If known) | <u> </u> | | (otate) | ····· |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Ranking Sign Below | |
|---|---|
| Did you pay or agree to pay someone who is NOT an attorne | ey to help you fill out bankruptcy forms? |
| ☑ No | |
| Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | |
| | |
| | |
| Under penalty of perjury, I declare that/I have read the summer that they are true and correct. | mary and schedules filed with this declaration and |
| ✗ /s/ Trisshauna Daniels | × |
| Signature of Debtor 1 | Signature of Debtor 2 |
| Date 8/2/2017 | Date |
| MM/DD/YYYY | MM/DD/YYYY |

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| Debtor 1 | Trisshauna First Name | Middle Name | Daniels Last Name | Case number [if known] |
|----------|--|--|------------------------------|---|
| 28. Wi | thin 2 years before ye editors, or other part | ou filed for bankruptcy, did y ies. | ou give a financial stater | nent to anyone about your business? Include all financial institutions, |
| 7 | No Yes. Fill in the detai | ils below. | | |
| | | | Date issued | |
| | Name | | MM/DD/YYYY | |
| | Number Street | | | |
| | City | State Zip Code | | |
| Part 12: | Sign Below | | | |
| true | and correct. I under nkruptcy case can re | stand that making a false st | atément, concealing prop | ments, and I declare under penalty of perjury that the answers are serty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signatur | e of Debtor 1 | | Signature of Debtor 2 |
| | Date 8/ | /2/2017 | | Date |
| Did y | you attach additional | I pages to Your Statement of | f Financial Affairs for Indi | viduals Filing for Bankruptcy (Official Form 107)? |
| LL. | No Yes | | | |
| Did y | ou pay or agree to p | ay someone who is not an a | ttorney to help you fill ou | t bankruptcy forms? |
| V | No | | | |
| | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| Debtor | Trisshauna | | Daniels | Case number (if | |
|--------------|--|---|---|--|----|
| 1 | First Name | Middle Name | Last Name | known) | |
| Part 2: | List Your Unexpired | Personal Property Lease | s | | |
| informa | ition below. Do not list re | perty lease that you listed in eal estate leases. Unexpired property lease if the trustee | leases are leases that | ry Contracts and Unexpired Leases (Official Form 106G), fill in ti t are still in effect; the lease period has not yet ended. You may 1 U.S.C. § 365(p)(2). | he |
| De | scribe your unexpired pe | rsonal property leases | | Will the lease be assumed? | |
| Les | ssor's name: | | | No | |
| | scription of leased perty: | | mma ta dina katan katan da mahara panda maya ka pangan ya pangan ka nagama ta ka pa | No. No. of the Control of the Contro | |
| Les | sor's name: | | eren mengan maga-pangkan maga-pangka kanamar kenala kanamar kenala anda da d | No No | |
| | scription of leased perty: | | | Emand. | |
| Les | ssor's name: | | | No Yes | |
| | scription of leased perty: | | | вариния. | |
| Les | sor's name: | | | No No Yes | |
| | scription of leased perty: | | | | |
| Les | sor's name: | | | No Yes | |
| | scription of leased perty: | | | | |
| Les | sor's name: | | | No Yes | |
| | scription of leased perty: | | | | |
| Les | sor's name: | | | No Yes | |
| | cription of leased perty: | | | - Constant | |
| ?ari 3: | Sign Below | | * | | |
| Unde prop | er penalty of perjury, I de- erty that is subject to an | clare that have indicated it unexpired lease | y intention about any | property of my estate that secures a debt and any personal | |
| _ | /s/ Trisshauna Daniels / | 444 | X Sig | gnature of Debtor 2 | |
| | ate 8/2/2017 MM/DD/YYYY | ****** | Dat | | |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Daniels, Trisshauna | Cons No | Case No | | |
|----------|--|--|------------------------------------|--|--|
| | Debtor(s) | VEST IVV. | | | |
| | | Chapter, | Chapter7 | | |
| | VERIF | ICATION OF CREDITOR MATI | RIX | | |
| knowled¢ | The above named Debtors hereby ve ge. | rify that the attached list of creditors is tru | e and correct to the best of their | | |
| Date: | 8/2/2017 | /s/ Daniels, Trissha Daniels, Trisshaun Signature of Debte | | | |
| | | | | | |

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| Debtor 1 Trisshauna | | Daniels | Case number (| Tf known) | | |
|--|--|--|----------------------------|--|---|--|
| First Name | Middle Name | Last Name | Column A Debtor 1 | ŕ | Column B Debtor 2 or non-filing spous | e |
| Unemployment compensation Do not enter the amount if you contenunder the Social Security Act. Instead, | list it here: | | \$0.00 | | *************************************** | |
| For you For your spouse | - | 60.00 60.00 | | | | |
| Pension or retirement income. Do n benefit under the Social Security Act. | ot include any amoun | t received that was a | \$0.00 | | | |
| 10.Income from all other sources not amount. Do not include any benefits re payments received as a victim of a war international or domestic terrorism. If n page and put the total below. | ceived under the Soci crime, a crime against | ial Security Act or t humanity, or | | | | |
| Total amounts from separate pages, if | | | +\$0.00 | | | *** |
| | • | | 1 | ٢ | т | |
| 11. Calculate your total current monti each | | _ | \$ <u>1,530.88</u> | + | | \$1,530.88 |
| column. Then add the total for Colur | nn A to the total for C | olumn B. | | L | · · · · · · · · · · · · · · · · · · · | |
| Para Barana Managara | | | | | | Total current monthly income |
| Part 2: Determine Whether the Mi 12. Calculate your current monthly income | THE RESIDENCE OF THE PARTY OF T | - | | | | ************************************** |
| 12a. Copy your total current monthly in | | illow these steps: | | opy line | 11 here | \$1,530.88 |
| Multiply by 12 (the number of mo | | | | .,., | | X 12 |
| 12b. The result is your annual income to | or this part of the forr | n. | | | 12 | b. <u>\$18,370.56</u> |
| 13 Calculate the median family income | that applies to you. | Follow these steps: | | | | ************************************** |
| Fill in the state in which you live. | | Illinois | | | | |
| Fill in the number of people in your hou | rsehold. | 4 | | | | |
| Fill in the median family income for you household. | r state and size of | | | | | 3. \$91,216.00 |
| To find a list of applicable median incorinstructions for this form. This list may 14. How do the lines compare? | ne amounts, go onlin also be available at the | e using the link specified a bankruptcy clerk's offic | in the separate e. | | | |
| 14a. Line 12b is less than or equal Go to Part 3. | to line 13. On the top | of page 1, check box 1 | , There is no presumption | of abu | se. | |
| 14b. Line 12b is more than line 13 Go to Part 3 and fill out Form | On the top of page | t, check box 2, The pres | umption of abuse is dete | rmined t | by Form 122A-2. | |
| Pan Se Sign Below | | | | | | |
| By signing here, I declare under penalt | y of perjuly that the in | formation on this statem | ient and jn any attachmer | nts is tru | e and correct. | |
| X /s/ Trisshauna Daniels | $' \times \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! $ | * | | | | |
| Signature of Debtor 1 | | Si | gnature of Debtor 2 | —————————————————————————————————————— | | |
| Date 8/2/2017 MM/DD/YYYY | | D | ate 8/2/2017 MM/DD/YYYY | | | |
| If you checked line 14a, do NOT fill If you checked line 14b, fill out Form | out or file Form 122A- 1122A-2 and file it wi | -2. th this form, | • | | | |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re | Trisshauna Daniels | | Case No. | | | |
|---|--|---------------------------------|---|--|--|--|
| | Debtor | | ************************************** | (If known) | | |
| | | | Chapter | Chapter 7 | | |
| | DISCLOSURE OF | COMPENSATION | N OF ATTORNEY FO | R DEBTOR | | |
| 1. | . Pursuant to 11 U.S.C. § 329(a) and f compensation paid to me within one rendered or to be rendered on behalf | year before the filing of the p | etition in bankruptcy, or agreed to be | e paid to me, for services | | |
| | For legal services, I have agreed to a | ccept | | \$1,250.00 | | |
| | Prior to the filling of this statement I | have received | | \$0.00 | | |
| | Balance Due | | | \$1,250.00 | | |
| 2. | . The source of the compensation paid | d to me was: | | | | |
| | ∠ Debtor | Other (specify) | | | | |
| 3. | . The source of the compensation paid | d to me is: | | | | |
| | 7 Debtor | Other (specify) | | | | |
| 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. | | | | | | |
| | I have agreed to share the above members or associates of my law the people sharing in the compe | | | | | |
| 5. | In return for the above-disclosed fee | | service for all aspects of the bankrup advice to the debtor in determining w | | | |
| | mother to me a position in | | | | | |
| | b. Preparation and filing of any | petition, schedules, statement | ts of affairs and plan which may be r | equired; | | |
| | c. Representation of the debtor | at the meeting of creditors an | d confirmation hearing, and any adj | ourned hearings thereof; | | |
| 6. | . By agreement with the debtor(s), the | above-disclosed fee does not | include the following services: | | | |
| | | | | | | |
| | | CERTIFICA | TION | - Continues to the approximation of the second continues to the second continues of the second continu | | |
| | certify that the foregoing is a completor(s) in this bankruptcy proceedings. | te statement ôf any agreement | t or arrangement for payment to me t | for representation of the | | |
| | 8/2/2017 | | /s/ Chad Mizelle | | | |
| | Date | | Signature of Attorney | | | |
| | | | Semrad Law Firm | | | |
| | | | Name of law firm | ************************************** | | |



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CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,250.00

attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350,00/hr. Adding additional bills \$31.00 Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either.

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.



As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm) LLC or an agent thereof.

| Client | Client |
|----------|--------|
| Attorney | |